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PTO/SB/81 (01-09)

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Application Number	10/537047
Filing Date	PCT/US 2003/0004735
First Named Inventor	MARK GEACH
Title	THEATRICAL & PROPHYLACTIC PREPARATIONS
Art. Unit	1623
Examiner Name	ELIZ PESOLEU
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

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I am the:

 Applicant/Inventor.

OR

 Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature	<i>MARK GEACH</i>	Date	<i>06/15/2010</i>
Name	<i>MARK GEACH</i>	Telephone	<i>310 593 1012</i>
Title and Company	<i>INVENTOR</i>		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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